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CASE TX/4-20017E

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July 16, 2004

Date of Deposit

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

ULRICH POSANSKI

APPLICATION NO: 10/623,887

FILED: JULY 17, 2003

FOR: PHARMACEUTICAL COMPOSITIONS FOR SPARINGLY SOLUBLE
THERAPEUTIC AGENTS**MS: Amendment**

Commissioner for Patents

PO Box 1450

Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

This paper is supplemental to the Information Disclosure Statement filed September 10, 2003. Since Applicant believes this paper is being filed before the mailing date of a first Office Action on the merits, no fees are believed to be required under 37 C.F.R. §1.97(b)(3). If a fee is deemed to be required, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 19-0134.


In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

Copies of these references are enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

Respectfully submitted,

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Date: July 16, 2004

FORM PTO-1449
(REV. 7-85)U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

ATTY. DOCKET NO.
TX/4-20017E
APPLICATION NO.
10/623,887
APPLICANT
Ulrich Posanski
FILING DATE
JULY 17, 2003

Group



U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA						
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	AM	63-033324	2/13/88	JP (Abstract)			<input type="checkbox"/>	<input type="checkbox"/>
	AN	63-160535	6/2/88	JP (Abstract)			<input type="checkbox"/>	<input type="checkbox"/>
	AO	63-010717	1/18/88	JP (Abstract)			<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

EXAMINER

DATE CONSIDERED

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.